## 105000055201

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Business Entry Name)                   |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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**EXAMINER** 

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: Landerdale Developers, L-K Name of Limited Liability Company   |
| The enclosed Articles of Amendment and fee(s) are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:   |
| James Hamway Name of Person   |
| Landardale Developers, LLC  Firm/Company  3331 NE 31st Court  Address  Lighthouse Point FT 33064  City/State and Zip Code  Imhamusy Q. Comcqst. net  E-mail address: (to be used for future annual report notification) |
| 2331 NE 31st Court  |
| Lighthouse Point F7 33064   |
| City/State and Zip Code  1/m hamway @ com(ast. net  E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| For further information concerning this matter, please call:  Jim Hamway  Name of Person  at (954) 4444-7212  Area Code & Daytime Telephone Number  |
| Name of Person Area Code & Daytime Telephone Number   |
| Enclosed is a check for the following amount:   |
| \$25.00 Filing Fee \$30.00 Filing Fee \$  |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Lauderdale D   | evelopers LLC  |
|--|--|
| ( <u>Name of the Limited Liability Compar</u><br>(A Florida Limited L  | iv as it now appears on our records.)                            |
| The Articles of Organization for this Limited Liability Company Florida document number $\angle \omega 5000055301$ .     | were filed on 6/30/05 and assigned                               |
| This amendment is submitted to amend the following:  |  |
| A. If amending name, enter the new name of the limited liabi   | lity company here:   |
| The new name must be distinguishable and end with the words "Limit "L.L.C."  | ed Liability Company," the designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)                  | 2331 NE 31st Court Lighthouse Bint = 33064                       |
| Enter new mailing address, if applicable:<br>(Mailing address MAY BE A POST OFFICE BOX)                                  | 2331 NE 31st Court III<br>Lighthouse Pont # 33064                |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here |  |
| Name of New Registered Agent:  | NA   |
| New Registered Office Address:   | Enter Florida street address                                     |
|  | , Florida  |
|  | City Zip Code  |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager of Managing Member being added or removed from our records:

MGR = Manager

| MGRM = Managing Member |                                       |   |                |  |
|------------------------|---------------------------------------|---|----------------|--|
| <u>Title</u>           | Name                                  | Address   | Type of Action |  |
|                        | SAME                                  |   | Add Remove     |  |
|                        | <u></u>                               |   | Add Remove     |  |
|                        |                                       |   | Add Remove     |  |
|                        |                                       |   | Add Remove     |  |
|                        | · · · · · · · · · · · · · · · · · · · |   | Add Remove     |  |
|                        |                                       |   | Sary.)         |  |
| D. If amend            | ling any other information, enter cha | nge(s) here: (Attach additional sheets, if neces  | sary.)         |  |
|                        |                                       |   |                |  |
|                        |                                       |   |                |  |
| Dated                  | ,,                                    | Hann  |                |  |
|                        | Signature of a ment                   | Der or authorized representative of a member  I GMUS Hamway  ed or printed name of signee |                |  |

Page 2 of 2

Filing Fee: \$25.00